

RECEIVED

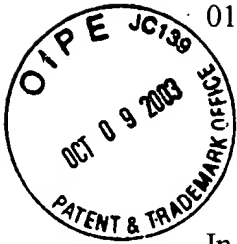
OCT 10 2003

Technology Center 2600

PATENT APPLICATION

#20
Amended
11-703
MDH

01263.000700.



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of:)
: Examiner: Lance W. Sealey
SIMON MICHAEL ROWE ET AL.)
: TC/Art Unit: 2671
Appln. No.: 09/229,898)
: Filed: January 14, 1999)
: For: IMAGE PROCESSING)
APPARATUS : October 8, 2003

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

SECOND SUPPLEMENTAL AMENDMENT

Sir:

Supplemental to the Amendment filed on June 27, 2003, and to the Supplemental Amendment filed on August 28, 2003, please further amend the above-identified application as follows, the specification changes beginning at page 2, and the remarks beginning at page 3.



In re Application of:

Docket No. 01263.000700.

SIMON MICHAEL ROWE ET AL.

Application No.: 09/229,898

Examiner: Lance W. Sealey

Filed: January 14, 1999

TC/Art Unit: 2671

For: IMAGE PROCESSING APPARATUS

Date: October 8, 2003

COMMISSIONER FOR PATENTS
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

Transmitted herewith is an Amendment in the above-identified application.

☒ No additional fee is required.

The fee has been calculated as shown below

CLAIMS AS AMENDED						
	(2) CLAIMS REMAINING AFTER AMENDMENT		(4) HIGHEST NO. PREVIOUSLY PAID FOR	(5) PRESENT EXTRA	RATE	ADDITIONAL FEE
TOTAL CLAIMS	* 239	MINUS	** 239	= 0	x \$9 \$18	\$0.00
INDEP. CLAIMS	* 62	MINUS	*** 62	= 0	x \$43 \$86	\$0.00
Fee for Multiple Dependent claims \$145°/\$290						\$0.00
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT---						\$0.00

RECEIVED
OCT 10 2003
Technology Center 2600

- * If the entry in Column 2 is less than the entry in Column 4, write "0" in Column 5.
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.
*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space.

☐ °Verified Statement claiming small entity status is enclosed, if not filed previously.

☐ A check in the amount of \$____ is enclosed.

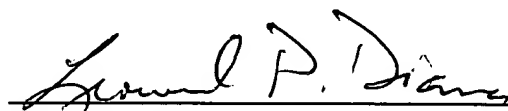
☐ Charge \$____ to Deposit Account No. 06-1205. A duplicate copy of this sheet is enclosed.

☒ Any prior general authorization to charge an issue fee under 37 C.F.R. 1.18 to Deposit Account No. 06-1205 is hereby revoked. The Patent and Trademark Office is hereby authorized to charge any additional fees under 37 C.F.R. 1.16 and 1.17 which may be required during the entire pendency of this application, or to credit any overpayment, to Deposit Account No. 06-1205. A duplicate copy of this paper is enclosed.

☐ A check in the amount of \$____ to cover the Extension fee for response with a ____-month extension is enclosed.

☐ A check in the amount of \$____ to cover the Information Disclosure Statement fee is enclosed.

☒ Applicants' undersigned attorney may be reached in our New York Office by telephone at (212) 218-2100 or by facsimile at (212) 218-2200. All correspondence should continue to be directed to our address given below.



Attorney for Applicants

Reg. No. 29,286

FITZPATRICK, CELLA, HARPER & SCINTO
30 Rockefeller Plaza
New York, New York 10132-3801

NY_MAIN 369457v2